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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Stine et al.

Application No. 10/017,629

Filed: December 13, 2001

Confirmation No. 6412

For: A CALL QUEUE IN A WIRELESS  
DEVICE

Examiner: Sujatha R. Sharma

Art Unit: 2618

Attorney Reference No. 6541-61435-01

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: MAIL STOP RCE, COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

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Date Mailed September 19, 2006

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**REQUEST FOR CONTINUED EXAMINATION  
TRANSMITTAL LETTER**

**This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the application referenced above.**

Submission required under 37 C.F.R. § 1.114

☒ Previously submitted

☒ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on  
July 20, 2006

FILING FEE

For	No. after amendment	No. paid for previously	Present Extra	Rate	Fee
Fee under 37 CFR 1.17(e)					\$790.00
Total Claims	16	- 22*	= 0	\$50.00	\$ 0.00
Indep. Claims	3	- 5**	= 0	\$200.00	\$ 0.00
Mult. Dep. Claims Fee (if not previously paid)				\$360.00	
One-month Extension of Time				\$120.00	\$120.00
<b>TOTAL FILING FEE</b>					<b>\$910.00</b>

\* greater of twenty or number for which fee has been paid.

\*\* greater of three or number for which fee has been paid.

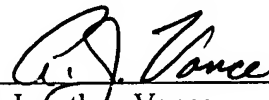
☒ Applicant petitions for a one-month extension of time as indicated above. If an additional extension of time is required, please consider this a petition therefor.

- ☒ A check in the amount of \$910.00 is attached.
- ☒ Please charge any additional fees that may be required in connection with filing this RCE and any extension of time, or credit any overpayment, to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ If the Patent and Trademark Office determines that the amendment submitted with this RCE results in an additional application size fee for pages in excess of 100, please charge the fee to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

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By   
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cc: Client  
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